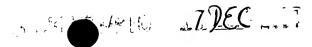
EXPRESS MAIL LABEL

No. EV3655937174S



COMBINED DECLARATION FOR PATENT APPLICATION AND POWER OF ATTORNEY

As below named inventor, I hereby declare that:

is attached hereto.

My residence, post office address and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled WHEELED CONVEYANCE
of which:

was filed on <u>3 June 2003</u> U.S. or PCT Application Serial No. <u>PCT/GB2003/002414</u> and was amended on <u>14 July 2004 and 5 October 2004</u> (if applicable)			
I hereby state that I have reviewed and understand the contents of above identified specification, including the claims, as amended by amendment referred to above.	the any		
I acknowledge the duty to disclose information which is material to examination of this application in accordance with Title 37, Code Federal Regulations, S. $1.56(a)$.	the of		
I hereby claim foreign priority benefits under Title 35, United Sta Code, S. 119 of any foreign application(s) for patent or invento certificate listed below and have also identified below any fore application for patent or inventor's certificate having a filing d before that of the application on which priority is claimed:	r's		
Prior Foreign Application(s) Priority Cla	<u>imed</u>		
O214223.0 United Kingdom (Number) United Kingdom (Day/Mo./Yr. Filed) [x] Yes []	No		
(Number) (Country) (Day/Mo./Yr. Filed) [] Yes []	No		
(Number) (Country) (Day/Mo./Yr. Filed) [] Yes []	No		
I hereby appoint IRA S. DORMAN, Registration No. 24,469, whose Postice Address is 330 Roberts Street, Suite 200, East Hartfo Connecticut 06108, my attorney to prosecute this application and transact all business in the Patent and Trademark Office connectherewith.			
Please address all correspondence to Ira S. Dorman at the aforest address, and direct all telephone calls to him at Area Code 80 Telephone No. 528-0772.	aid 50,		
I hereby further declare that all statements made herein of my of knowledge are true and all statements made on information and belt are believed to be true; and further that these statements were may with the knowledge that willful false statements and the like so may are punishable by fine or imprisonment, or both, under Section 1001 Title 18 of the United States Code and that such willful false statements may jeopardize the validity of the application or any pate issued thereon.	ief ade ade of		
Full name of sole or first inventorChristopher James MILLS			
Inventor's signature Date			
Residence Oxford, United Kingdom Citizenship United Kingdom			
Post Office Address 9 Acre Close, Headington, Oxford, Oxfordshir	e		

Full name of second joint inventor, if any		
Second Inventor's signature		
Residence	•	<u>-</u>
Full name of third joint inventor, if any		
Third Inventor's signature	Date	
Residence Citizenship Post Office Address		- - -